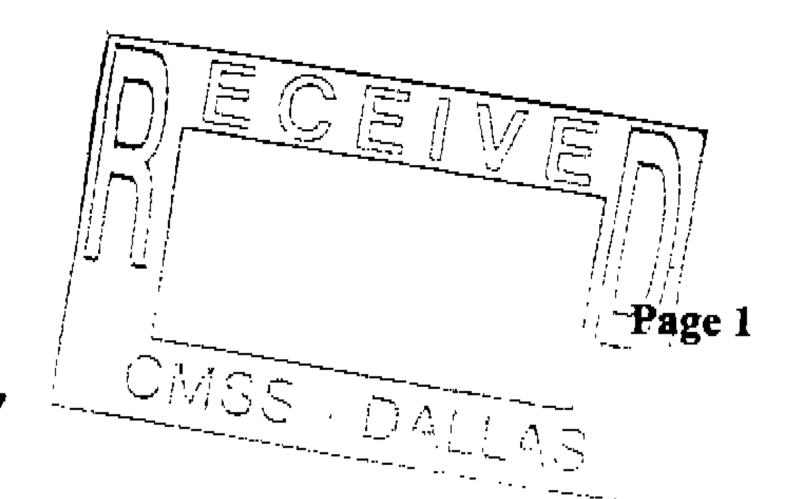
United States Bankruptcy Court <u>SOUTHERN DISTRA</u> 61288, Houston TX 77208 (Houston Div	ICT OF TEXAS P.O.Box vision)	PROOF CLAIM		
Name of Debtors	Case Number			
X_Stage Stores, Inc., a Delaware corporation Specialty Retailers, Inc., a Texas corporation Specialty Retailers, Inc. (NV), a Nevada corporation	00-35078-H2-11 00-35079-H2-11 00-35080-H2-11	788-11165 Creditor ID#:		
*place an "x" beside the name of the Debtor you are filing a claim against				
Name of Creditor (The person or other entity to whom the debtor owes money or property): Chasemellon Shareholder Serv	Check box if you are aware that anyone else a filed a proof of claim relating to your claim. Attach copy of statement	United States District Court Southern District Court FILED OF Texas		
Nome and address wetters stress should be e	giving particulars.	Mich 3 20 Page		
Name and address where notices should be sent: ***********************************	Check box if you have never received any notices from the bankruptcy court in this case	Michael N. Milby, Clerk		
PO Box 360857 Pittsburgh PA 15251-6857	Check box if the address differs from the address on the envelope sent to you by the court.			
Account or other number by which creditor identifies debtor: $CH85254C$	Check here replaces if this claim amends a prev	viously filed claim, dated:		
I. Basis for Claim Goods sold Services performed Money loaned	Retiree benefits as defined in 11 to Wages, salaries, and compensation Your SS#:	on (Fill out below)		
Personal injury/wrongful death Taxes	Unpaid compensation for services from to			
/ 141= ==		, , , , , , , , , , , , , , , , , , ,		
· · · · · · · · · · · · · · · · · · ·	3. If court judgment, date of	(date)		
2. Date debt was incurred:	3. If court judgment, date of the ltem 5 or 6 below.	otained:		
2. Date debt was incurred: 1. Total Amount of Claim at Time Case Filed: \$ 500 _ 97	3. If court judgment, date of the ltem 5 or 6 below.	otained: Attach itemized statement of all interest or		
2. Date debt was incurred: 1. Total Amount of Claim at Time Case Filed: \$ 500, 90 for all or part of your claim is secured or entitled to priority, also comple Check this box if claim includes interest or other charges in additional charges.	3. If court judgment, date of the Item 5 or 6 below. on to the principal amount of the claim. 6. Unsecured Priority Claim Check this box if you have an	otained: Attach itemized statement of all interest or		
2. Date debt was incurred: 1. Total Amount of Claim at Time Case Filed: \$, 500, 970 If all or part of your claim is secured or entitled to priority, also completed to priority, also completed to the charges in additional charges. 2. Date debt was incurred: 3. Secured Claim at Time Case Filed: \$, 500, 970 Check this box if claim is secured or entitled to priority, also completed to priority, also complete additional charges. 3. Secured Claim. Check this box if your claim is secured by collateral (including a priority).	3. If court judgment, date of the Item 5 or 6 below. In to the principal amount of the claim. 6. Unsecured Priority Claim Check this box if you have an Amount entitled to priority \$_ Specify the priority of the claim Wages, salaries, or commissions (up to the bankruptcy petition or cessation of U.S.C. § 507(a)(3) Contributions to an employee benefit purple to \$1,950* of deposits toward purch	Attach itemized statement of all interest or unsecured priority claim a: a: b: 4,300),* earned within 90 days before filing of the debtor's business, whichever is earlier - 11 blan - 11 U.S.C. § 507(a)(4). hase, lease, or rental of property or services for		
2. Date debt was incurred: 4. Total Amount of Claim at Time Case Filed: \$ 500000000000000000000000000000	3. If court judgment, date of the ltem 5 or 6 below. In to the principal amount of the claim. 6. Unsecured Priority Claim Check this box if you have an Amount entitled to priority \$_ Specify the priority of the claim Wages, salaries, or commissions (up to the bankruptcy petition or cessation of U.S.C. § 507(a)(3) Contributions to an employee benefit purch personal, family, or household use - 11 Alimony, maintenance, or support owe 507(a)(7). Taxes or penalties owed to government other - Specify applicable paragraph of the claim of the cl	Attach itemized statement of all interest or unsecured priority claim 1. unsecured priority claim 1. us \$4,300),* earned within 90 days before filing of the debtor's business, whichever is earlier - 11 plan - 11 U.S.C. § 507(a)(4). nase, lease, or rental of property or services for U.S.C. § 507(a)(6). d to a spouse, former spouse, or child - 11 U.S.C. § atal units - 11 U.S.C. § 507(a). In the debtor's business and services for the debtor's business, whichever is earlier - 11 In the debtor's business and services for the debtor's business and s		
2. Date debt was incurred: 1. Total Amount of Claim at Time Case Filed: \$ \$ 50 (0 , 9 ? 6) If all or part of your claim is secured or entitled to priority, also comple Check this box if claim includes interest or other charges in additional charges. 5. Secured Claim Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: Real Estate Motor Vehicle Other All personal and intangible property of Debtor's Estate Value of Collateral: \$ Amount of arrearage and other charges at time case filed included in secured claim, if any \$ the purpose of making this proof of claim. Supporting Documents: Attach copies of supporting documents, such notes, purchase orders, invoices, itemized statements of running accounts, cont court judgments, mortgages, security agreements, and evidence of perfection of DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.	3. If court judgment, date of the ltem 5 or 6 below. In to the principal amount of the claim. 6. Unsecured Priority Claim Check this box if you have an Amount entitled to priority \$_ Specify the priority of the claim Wages, salaries, or commissions (up to the bankruptcy petition or cessation of U.S.C. § 507(a)(3) Contributions to an employee benefit purch personal, family, or household use - 11 Alimony, maintenance, or support owe 507(a)(7). Taxes or penalties owed to government of the cases commenced on or after the date of a set of the cases commenced on or after the date of a set of the cases.	Attach itemized statement of all interest or unsecured priority claim 1. unsecured priority claim 1. us \$4,300),* earned within 90 days before filing of the debtor's business, whichever is earlier - 11 plan - 11 U.S.C. § 507(a)(4). nase, lease, or rental of property or services for U.S.C. § 507(a)(6). d to a spouse, former spouse, or child - 11 U.S.C. § atal units - 11 U.S.C. § 507(a). In the debtor's business and services for the debtor's business, whichever is earlier - 11 In the debtor's business and services for the debtor's business and s		
2. Date debt was incurred: 4. Total Amount of Claim at Time Case Filed: \$ 500 , 970	3. If court judgment, date of the lam. The lam of the principal amount of the claim. 6. Unsecured Priority Claim Check this box if you have an Amount entitled to priority \$_ Specify the priority of the claim Wages, salaries, or commissions (up to the bankruptcy petition or cessation of U.S.C. § 507(a)(3) Contributions to an employee benefit post of the personal, family, or household use - 11 Alimony, maintenance, or support owe 507(a)(7). Taxes or penalties owed to government of the cases commenced on or after the date of a support of the cases commenced on or a support of the cases commenced on the cases commenced on the cases commenced or a support of the cases commenced or a support of the cases commenced or a suppo	Attach itemized statement of all interest or unsecured priority claim state of \$4,300),* earned within 90 days before filing of the debtor's business, whichever is earlier - 11 plan - 11 U.S.C. § 507(a)(4). mase, lease, or rental of property or services for U.S.C. § 507(a)(6). d to a spouse, former spouse, or child - 11 U.S.C. plantal units - 11 U.S.C. § 507(a)(8). of 11 U.S.C. § 507(a). If 98 and every 3 years thereafter with respect to		

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AMANANAN DAN

STAGE STORES, INC. ATTN:BOB ARONSON 10201 MAIN STREET HOUSTON, TX 77025



Account Manager: Telephone:

Mona Vorhees (214) 965-2236

Date:

June 15, 2000

Customer Number:

CH85254C

Invoice Number:

127043

The following is a summary of services and disbursements pertaining to your account. For further details please review the enclosure(s).

Period:

05/01/2000 - 05/31/2000

SERVICES

DISBURSEMENTS

\$1,504.49 \$94.06

TOTAL THIS INVOICE

\$1,598.55

A LATE PAYMENT FEE OF 1.5% PER MONTH WILL BE CHARGED ON BALANCES OUTSTANDING MORE THAN 45 DAYS.

Should you have any questions concerning the above, please contact your relationship manager listed above or the accounts receivable department at (888) 204-3933.

Wire payments may be payable to:

Mellon Bank

ABA 043000261 Account 103-9636

Attention A/C Rec. Re: Client CH85254C

Invoice 127043

Checks may be payable to:

Chase Mellon Shareholder Services

Re:Client CH85254C Invoice 127043

Please remit using return envelope provided to:

Accounting Department

P.O. Box 360857 Pittsburgh PA 15251-6857

Important: Please detach and return this portion of invoice with your payment.

Client Name

STAGE STORES, INC.

Customer Number Invoice Number

CH85254C 127043

Total Amount Due

\$1,598.55



STAGE STORES, INC.

Date

June 15, 2000

Client #

CH85254C

Invoice #

127043

Services for the Period:

05/01/2000 - 05/31/2000

Principal Transfer Agent & Registrar

Description of Issue(s)
COMMON

ACCOUNTS

Monthly Flat Fee In Accordance With Your Contract Agreement - Including Account Maintenance And Issuance Functions

854.49

Allowance:

1,000

Against Allowance:

0 300 *ACCOUNT (\$)*

AT 0.00

EACH

0.00

\$854.49

STOCKHOLDERS MEETING

MEETING DATE - 05/25/2000 RECORD DATE - 04/06/2000

Cancelling Of Proxy Mailing

500.00

\$500.00

ISSUANCE

Certificates Issued

Allowance:

1,000

Against Allowance:

92

CERTIFICATE(S)

AT 0.00

EACH

0.00

Stock Options/Restricted Items

Allowance:

48

Against Allowance:

30

MISCELLANEOUS

Extra Time Incurred

Processing Of List-R/D 05/30/00

150 00

\$150.00

\$0.00

Total Services

\$1,504.49

Disbursements

STOCKHOLDERS MEETING

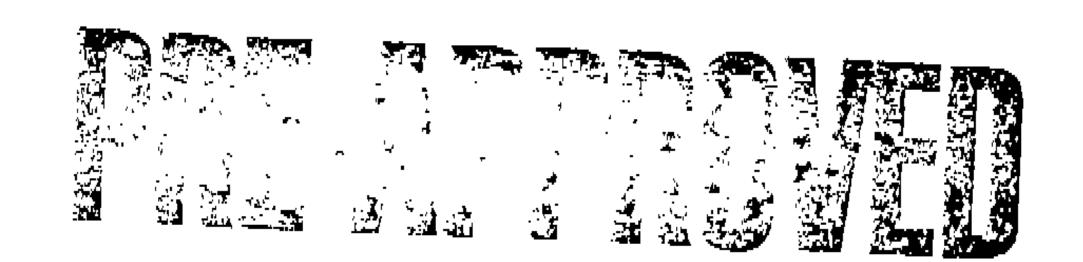
MEETING DATE - 05/25/2000 RECORD DATE - 04/06/2000

-



STAGE STORES, INC.		Date Client # Invoice #	June 15, 2000 CH85254C 127043
List Paper		0.55	
List Binder (s)		3.77	\$4.32
MISCELLANEOUS			
List Binder (s)		11.31	
List Paper		1.81	
Overnight Delivery		48.08	
Miscellaneous Expenses Covering Postage, Stationery, Telephone Calls, & Mailing Insurance Etc. TAX		28.10	\$89.30
Postage Mailing 1099 Forms		0.22	
		0.33	
Stationery Used For 1099's		0.11	\$0.44
	Total Disbursements Total Amount this Period		\$94.06 \$1,598.55





STAGE STORES, INC. ATTN:BOB ARONSON 10201 MAIN STREET HOUSTON, TX 77025

Account Manager: Telephone:

Mona Vorhees (214) 965-2236

Date:
Customer Number:
Invoice Number:

May 10, 2000 CH85254C 124428

Addinionalion Copy

The following is a summary of services and disbursements pertaining to your account. For further details please review the enclosure(s).

Period:

04/01/2000 - 04/30/2000

SERVICES DISBURSEMENTS

\$854.49 \$53.88

TOTAL THIS INVOICE

\$908.37

PAST DUE INVOICE(S)/FINANCE CHARGES

\$921.65

TOTAL BALANCE DUE

\$1,830.02

Past due balance is reflected as of the end of the billing period shown above. Any payments received after the end of the billing period will be reflected on the next statement.

ACCOUNT	CURRENT	OVER 30 DAYS	OVER 60 DAYS	OVER 90 DAYS	120+ DAYS
AGING	1,830.02	0.00	0.00	0.00	0.00

A LATE PAYMENT FEE OF 1.5% PER MONTH WILL BE CHARGED ON BALANCES OUTSTANDING MORE THAN 45 DAYS.

Should you have any questions concerning the above, please contact your relationship manager listed above or the accounts receivable department at (888) 204-3933.

Wire payments may be payable to:

Mellon Bank

ABA 043000261 Account 103-9636

Attention A/C Rec.
Re: Client CH85254C
Invoice 124428

254C 28 Checks may be payable to:

Chase Mellon Shareholder Services Re:Client CH85254C

Invoice 124428

Please remit using return envelope provided to:

Accounting Department P.O. Box 360857 Pittsburgh PA 15251-6857

Important: Please detach and return this portion of invoice with your payment.

Client Name

STAGE STORES, INC.

Customer Number Invoice Number

CH85254C 124428

Total Amount Due

\$1,830.02

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						Page 2
STAGE STORES, I	NC.				Date Client # Invoice #	May 10, 2000 CH85254C 124428
Services for the Peri Principal Transfer A			000 - 04/30 escription of COMN	f Issue(s)		
ACCOUNTS						
Monthly Flat Fee In Contract Agreement Maintenance And Is	Accordance With You t - Including Account suance Functions	ur			854.49	
Allowance:						
Against Allowance:						
298	0 ACCOUNT (S)	ΑТ	0.00	EACH	0.00	\$854.49
ISSUANCE						
Allowance:	1,000					
Against Allowance:	73 CERTIFICATE(S)	AT	0.00	EACH	0.00	
Allowance:	48					
Against Allowance:						
10	20 OPTION(S)	AT	0.00	EACH	0.00	\$0.00
Disbursements			Total Se	rvices		\$854.49
MISCELLANEOUS						
Overnight Delivery					24.04	
<u> </u>	nses Covering Postag 1e Calls, & Mailing	е,			29.84	\$53.88
				bursements nount this Period		\$53.88 \$908.37



STAGE STORES, INC.

Date

May 10, 2000

Client#

CH85254C

Invoice #

124428

DATE	INVOICE NO.	DESCRIPTION	AMOUNT CREDIT	BALANCE
04/10/2000 05/10/2000	0122614IN 124428	20000301 20000331 Period: 04/01/2000 - 04/30/2000	921.65 908.37	921.65 908.37
			TOTAL BALANCE DUE	\$1,830.02